

CREST VIEW
612 VIEW STREET

NEW LISBON 53950 Phone: (608) 562-3667

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/03): 60

Total Licensed Bed Capacity (12/31/03): 60

Number of Residents on 12/31/03: 59

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

Yes

Yes

Yes

58

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years		15.3	
Supp. Home Care-Personal Care	No					More Than 4 Years		39.0	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.7			25.4	
Day Services	No	Mental Illness (Org./Psy)	35.6	65 - 74	20.3			79.7	
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	32.2				
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	33.9				
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.9				
Congregate Meals	Yes	Cancer	0.0						
Home Delivered Meals	Yes	Fractures	0.0		100.0				
Other Meals	No	Cardiovascular	5.1	65 & Over	98.3				
Transportation	No	Cerebrovascular	20.3						
Referral Service	No	Diabetes	3.4	Gender	%				
Other Services	No	Respiratory	3.4						
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	32.2	Male	20.3				
Provide Day Programming for Developmentally Disabled	No		100.0	Female	79.7				
					100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	5	100.0	257	38	100.0	123	0	0.0	0	16	100.0	157	0	0.0	0	0	0.0	0	59	100.0	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	5	100.0		38	100.0		0	0.0		16	100.0		0	0.0		0	0.0		59	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	9.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	2.0	Bathing	1.7	74.6	23.7	59
Other Nursing Homes	13.7	Dressing	8.5	66.1	25.4	59
Acute Care Hospitals	68.6	Transferring	25.4	50.8	23.7	59
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	18.6	55.9	25.4	59
Rehabilitation Hospitals	0.0	Eating	59.3	33.9	6.8	59
Other Locations	5.9	*****				
Total Number of Admissions	51	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.8	Receiving Respiratory Care	3.4	
Private Home/No Home Health	13.7	Occ/Freq. Incontinent of Bladder	47.5	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	15.7	Occ/Freq. Incontinent of Bowel	23.7	Receiving Suctioning	0.0	
Other Nursing Homes	3.9			Receiving Ostomy Care	1.7	
Acute Care Hospitals	13.7	Mobility		Receiving Tube Feeding	1.7	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	32.2	
Rehabilitation Hospitals	0.0					
Other Locations	9.8	Skin Care		Other Resident Characteristics		
Deaths	43.1	With Pressure Sores	3.4	Have Advance Directives	84.7	
Total Number of Discharges		With Rashes	11.9	Medications		
(Including Deaths)	51			Receiving Psychoactive Drugs	66.1	

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	Other Hospital-Based Facilities	All Facilities		
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.7	90.1	1.07	87.4	1.11
Current Residents from In-County	89.8	83.8	1.07	76.7	1.17
Admissions from In-County, Still Residing	37.3	14.2	2.63	19.6	1.90
Admissions/Average Daily Census	87.9	229.5	0.38	141.3	0.62
Discharges/Average Daily Census	87.9	229.2	0.38	142.5	0.62
Discharges To Private Residence/Average Daily Census	25.9	124.8	0.21	61.6	0.42
Residents Receiving Skilled Care	100.0	92.5	1.08	88.1	1.14
Residents Aged 65 and Older	98.3	91.8	1.07	87.8	1.12
Title 19 (Medicaid) Funded Residents	64.4	64.4	1.00	65.9	0.98
Private Pay Funded Residents	27.1	22.4	1.21	21.0	1.29
Developmentally Disabled Residents	0.0	1.2	0.00	6.5	0.00
Mentally Ill Residents	35.6	32.9	1.08	33.6	1.06
General Medical Service Residents	32.2	22.9	1.40	20.6	1.57
Impaired ADL (Mean)*	49.5	48.6	1.02	49.4	1.00
Psychological Problems	66.1	55.4	1.19	57.4	1.15
Nursing Care Required (Mean)*	6.8	7.0	0.97	7.3	0.93